

APPLICATION DATA SHEET

37 CFR §1.76

APPLICATION INFORMATION

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?:

Computer Readable Form

(CRF)?: No

Number of copies of CRF::

Title:: FLUID OPERATED ACTUATORS AND
PNEUMATIC UNLOADING ORTHOSES

Attorney Docket Number:: P544 0002

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 12

Small Entity?: Yes

Latin name::

Variety denomination name::

Petition included?: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appln.?: No

APPLICANT INFORMATION

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Greg
Middle Name::
Family Name:: Hakonson
Name Suffix::
City of Residence:: Dawson City
State or Province of
Residence:: Yukon Territory
Street of mailing address:: Bag 395
City of mailing address:: Dawson City
State or Province of
mailing address:: Yukon Territory
Country of mailing
address:: Canada
Postal or Zip Code of
mailing address:: Y0B 1G0

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Christopher
Middle Name::
Family Name:: Denny
Name Suffix::
City of Residence:: Victoria
State or Province of
Residence:: BC

Street of mailing address:: 21 Cambridge Street
City of mailing address:: Victoria
State or Province of
mailing address:: BC
Country of mailing
address:: Canada
Postal or Zip Code of
mailing address:: V8V 4A7

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Scott
Middle Name::
Family Name:: Phillips
Name Suffix::
City of Residence:: Victoria
State or Province of
Residence:: BC
Street of mailing address:: 5 - 1246 Fairfield Road
City of mailing address:: Victoria
State or Province of
mailing address:: BC
Country of mailing
address:: Canada
Postal or Zip Code of
mailing address:: V8V 3B5

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Mark
Middle Name::

Family Name:: Foster
Name Suffix::
City of Residence:: Victoria
State or Province of
Residence:: BC
Street of mailing address:: 1659 Blair Avenue
City of mailing address:: Victoria
State or Province of
mailing address:: BC
Country of mailing
address:: Canada
Postal or Zip Code of
mailing address:: V8N 1M6

CORRESPONDENCE INFORMATION

Correspondence Customer
Number:: **000720**
Phone Number:: (604) 669-3432
Fax Number:: (604) 681-4081
Email address:: docket3@patentable.com

REPRESENTATIVE INFORMATION

Representative Customer Number::	000720
-------------------------------------	--------

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/CA2004/001040	19 July 2004
PCT/CA2004/001040	An application claiming the benefit under 35 USC 119(e)	60/487948	18 July 2003

FOREIGN PRIORITY INFORMATION

Country::	Application number::	Filing Date::	Priority Claimed::

ASSIGNEE INFORMATION

Assignee name::	Pneu Medex Inc.
Street of mailing address::	Bag 395
City of mailing address::	Dawson City
State or Province of mailing address::	Yukon Territory
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	Y0B 1G0